87101 DEFINITIONS

87101

For purposes of this chapter the following definitions shall apply: (Continued)

- (d) (Continued)
 - (4) <u>Dementia.</u> "Dementia" means a <u>deterioration the loss</u> of intellectual function (<u>such</u> as thinking, remembering, reasoning, exercising judgement and making decisions) and other cognitive <u>skills functions</u>, <u>leading to a decline in one's sufficient to interfere with an individual's</u> ability to perform activities of daily living <u>or to carry out social or occupational activities</u>. <u>Dementia is not a disease itself, but rather a group of symptoms that may accompany certain conditions or diseases, including Alzheimer's Disease. Symptoms may include changes in personality, mood, and/or behavior. Dementia is irreversible when caused by disease or injury, but may be reversible when caused by depression, drugs, alcohol, or hormone/vitamin imbalances. (Continued)</u>
 - (7) Direct care staff. "Direct care staff" means the licensee and/or those individuals employed by the licensee who provide direct care and/or direct assistance with services to the residents, including, but not limited to, assistance with activities of daily living.
 - (78) (Continued)
 - (89) (Continued)
 - (910) (Continued)
- (m) (1) <u>Mild Cognitive Impairment.</u> "<u>Mild cognitive impairment</u>" is a condition that presents one or more of the following impairments/disturbances:
 - (A) Impairment in memory (reduced ability to learn or recall information);
 - (B) Impairment in perceptual-motor abilities;
 - (C) Impairment in language (e.g., comprehension, word finding);
 - (D) <u>Disturbance in executive function (e.g., planning, organizing, sequencing, abstract thinking); and</u>
 - (E) <u>Disturbance in attention or speed of information processing.</u> (Continued)

Authority Cited: Sections 1569.23(d), 1569.30, 1569.616(j), and 1569.698(c), Health and Safety

Code.

Reference: 42 CFR 418.3; Sections 1569.1, 1569.2, 1569.5, 1569.10, 1569.145, 1569.15,

1569.153, 1569.157, 1569.158, 1569.17, 1569.19, 1569.191(e), 1569.193(a) and (e), 1569.20, 1569.21, 1569.23, 1569.30, 1569.31, 1569.312, 1569.33(d), 1569.38, 1569.44, 1569.47, 1569.54, 1569.616, 1569.626, 1569.699(a), 1569.73, 1569.74, and 1569.82, 5350, and 7185 et seq., Health and Safety Code; Section 15610.13, Welfare and Institutions Code; and Sections 1800,

4615, and 4753, Probate Code.

Amend Section 87111 to read:

87111 ADVERTISEMENTS AND LICENSE NUMBER

87111

(a) <u>iIn accordance with Health and Safety Code Sections 1569.681 and 1569.681</u>, <u>Llicensees shall reveal each facility license number in all <u>correspondence and advertisements</u>, <u>including Internet or correspondence</u>. (Continued)</u>

Authority Cited: Section 1569.30(a), Health and Safety Code.

Reference: Sections 1569.681 and 1569.681, Health and Safety Code.

87222 PLAN OF OPERATION

87222

- (a) Each facility shall have and maintain a current, written definitive plan of operation. The plan and related materials shall be on file in the facility and shall be submitted to the licensing agency with the license application. Any significant changes in the plan of operation which would affect the services to residents shall be submitted to the licensing agency for approval. The plan and related materials shall contain the following: (Continued)
 - (6) Plan for training of staff, as required by Section 87565(c).
 - (7) A sketch of the building(s) to be occupied, <u>showing dimensions and</u> including:
 - (A) aA floor plan which describes describing the capacities of the buildings for the uses intended.
 - (B) aA designation of the rooms to be used for nonambulatory residents.
 - (C) and aA sketch of the grounds showing buildings, driveways, fences, storage areas, pools, gardens, recreation area and other space used by the residents-All sketches shall show dimensions. (Continued)
- (b) A licensee who advertises or promotes dementia special care, programming, and/or environments shall include additional information in the plan of operation as specified in Section 87725(a)(3).
- (c) A licensee who accepts or retains residents diagnosed by a physician to have dementia, and/or determined by a physician to be nonambulatory as a result of mental confusion, shall include additional information in the plan of operation as specified in Section 87724(b).

Authority Cited: Section 1569.30, Health and Safety Code.

Reference: Sections 1569.15, 1569.157, 1569.175, 1569.2, 1569.30, 1569.31, 1569.312,

1569.313, and 1569.316(a), and 1569.626, Health and Safety Code; and

Section 11006.9, Welfare and Institutions Code.

Amend Section 87565 to read:

87565 PERSONNEL REQUIREMENTS - GENERAL (Continued)

87565

- (f) In addition to Sections 87565(c), (d), and (e), licensees who accept or retain residents with dementia shall meet the training requirements in Section 87724(c)(3).
- (g) In addition to Sections 87565(c), (d), and (e), licensees who advertise or promote special care, programming and/or environments for persons with dementia shall ensure that direct care staff meet the training requirements specified in Section 87725.1, Training Requirements if Advertising Dementia Special Care, Programming, and/or Environments.
- $(\underline{\mathbf{fh}})$ (Continued)
- (gi) (Continued)
- (hi) (Continued)
- (ik) (Continued)
- (illet l) (Continued)

Authority Cited: Section 1569.30, Health and Safety Code.

Reference: Sections 1569.17, 1569.30, 1569.31, 1569.312, and 1569.625 and 1569.626,

Health and Safety Code; and Section 42001, Vehicle Code.

87566 PERSONNEL RECORDS

87566

- (a) <u>For each employee, eEmployment application forms shall be completed and maintained on each employee and shall be available to the Department or licensing agency for review in the personnel records.</u> Each personnel record shall contain the following information: (Continued)
- (b) <u>Licensees shall maintain in the personnel records, documentation verifying completion of required training that includes the trainer's name, qualifications and contact information, subject(s) covered in the training, number of hours and date(s) attended.</u>
 - (1) <u>Licensees caring for residents with dementia shall ensure that the records include verification of the training specified in Section 87724(c)(3), and if applicable, Section 87725.1, Training Requirements if Advertising Dementia Special Care, Programming, and/or Environments.</u>
- (bc) (Continued)
- (ed) (Continued)
- (de) (Continued)
- (ef) (Continued)
- (fg) (Continued)
- (h) The licensing agency shall be entitled to inspect, audit, remove if necessary, and copy the personnel records upon demand during normal business hours.

Authority Cited: Sections 1569.30 and 1569.616(j), Health and Safety Code.

Reference: Sections 1569.30, 1569.31, 1569.312, 1569.613, 1569.616, and 1569.625, and

1569.626, Health and Safety Code.

Amend Section 87569 to read:

87569 MEDICAL ASSESSMENT (Continued)

87569

- (b) The medical assessment shall include, but not be limited to: (Continued)
 - (5) A determination of the person's ambulatory status as defined by in Section 87101(a-)(46), and bedridden status, as defined in Section 87582(d). The assessment shall indicate whether nonambulatory status is based upon the resident's physical condition, mental condition or both. (Continued)

Authority Cited: Section 1569.30, Health and Safety Code.

Reference: Sections 1569.1, 1569.2, 1569.30, 1569.31, 1569.312, 1569.315, and 1569.54,

Health and Safety Code.

87570 RESIDENT RECORDS (Continued)

87570

- (b) Each record shall contain at least the following information: (Continued)
 - (6) Names, addresses, and telephone numbers of responsible persons, defined by Section 87101(r-)(35), to be notified in case of accident, death, or other emergency. (Continued)
 - (15) Documents and information required by the following:
 - (A) Section 87583, Pre-Admission Appraisal General;
 - (B) Section 87584, Functional Capabilities;
 - (C) Section 87585, Mental Condition;
 - (D) Section 87586, Social Factors;
 - (E) Section 87587, Reappraisals; and
 - (F) Section 87588, Documentation and Support. (Continued)

Authority Cited: Section 1569.30, Health and Safety Code.

Reference: Sections 1569.1, 1569.2, 1569.30, 1569.31, 1569.312, 1569.315, 1569.32,

1569.54, and 1569.73, Health and Safety Code; and Section 11006.9, Welfare

and Institutions Code.

Amend Section 87582 to read:

87582 ACCEPTANCE AND RETENTION LIMITATIONS (Continued)

87582

- (b) The following persons may be received into or retained by a Residential Care Facility for the Elderly: (Continued)
 - (4) Persons with mild problems such as including, but not limited to, forgetfulness, wandering, confusion, irritability, and inability to manage money, etc. (Continued)
- (c) Except as otherwise provided in Section 87582(f), no resident shall be admitted or retained in a residential care facility for the elderly if any of the following apply: (Continued)
 - (3) The resident is not elderly and either has needs which that are in conflict with the other residents or the program of services offered, or requires more care and supervision than other residents.
 - (4) The resident's primary need for care and supervision results from dementia or a mental disorder resulting in ongoing behavior which that would upset the general resident group.
 - (5) The resident would require a greater amount of care and supervision than the other residents in the facility, or cannot generally benefit from the program of services available in the facility.
 - (56) (Continued)

Authority Cited: Sections 1569.30 and 1569.698(c), Health and Safety Code.

Reference: Sections 1250, 1569.1, 1569.2, 1569.30, 1569.31, 1569.312, 1569.54,

1569.699, and 1569.72, Health and Safety Code.

87591 OBSERVATION OF THE RESIDENT

87591

The licensee shall <u>ensure that residents are</u> regularly observed <u>each resident</u> for changes in physical, mental, emotional and social functioning. The licensee shall provide <u>and that</u> appropriate assistance <u>is provided</u> when such observation reveals unmet needs which might require a change in the existing level of service, or possible discharge, or transfer to another type of facility. When changes such as unusual weight gains or losses or deterioration of <u>cognitive ability or a physical</u> health condition are observed, the licensee shall document ensure that such changes and bring such changes are documented and brought to the attention of the resident's physician and the resident's responsible person, if any.

Authority Cited: Section 1569.30, Health and Safety Code.

Reference: Sections 1569.1, 1569.2, 1569.30, 1569.31 and 1569.312, Health and Safety

Code.

Amend Section 87593 to read:

87593 REQUIREMENTS FOR EMERGENCY ADULT PROTECTIVE SERVICES PLACEMENTS (Continued)

87593

- (d) The licensee shall not accept the following persons as APS emergency placements: (Continued)
 - (6) Individuals whose primary need for care and supervision results from dementia or a mental disorder resulting in ongoing behavior that would upset the general resident group [Section 87582(c)(4)], unless the licensee meets the requirements in Section 87593(e) below or who cannot generally benefit from the program of services available in the facility [Section 87582(c)(5)]. (Continued)
- (e) If a licensee accepts an APS emergency placement with dementia, the licensee must shall meet the requirements in Section 87724, Care of Persons with Dementia, and ensure the following criterion is met. including that include, but are not limited to, the following:
 - Prior to acceptance, the licensee must have a dementia waiver, pursuant to Section 87116, to accept and retain residents shall ensure that the facility has a nonambulatory fire clearance for each room that will be used to accommodate a resident with dementia who are considered is nonambulatory, as described in Section 87724(c)(1) because they are unable to mentally respond to a sensory signal approved by the State Fire Marshall or an oral instruction relating to fire danger. (Continued)

Authority Cited: Sections 1569.30 and 1569.31, Health and Safety Code; Sections 15763(a), (a)(2), and (d), Welfare and Institutions Code; and Senate Bill 2199 (Chapter 946, Statutes of 1998), Section 14 uncodified.

Reference: Sections 15610.13 <u>and 15763</u>, Welfare and Institutions Code; and Sections 1569.1, 1569.2, 1569.312, 1569.315, 1569.316, 1569.47, 1569.54, 1569.698, 1569.699, 1569.71, 1569.72, 1569.73, and 13131, Health and Safety Code.

87724 CARE OF PERSONS WITH DEMENTIA

87724

- (a) This section applies to licensees who accept or retain residents diagnosed by a physician to have dementia and/or determined by a physician to be nonambulatory as a result of mental confusion. This section does not apply to licensees who accept or retain residents with a diagnosis of mild cognitive impairment as defined in Section 87101(m)(1).
- (a)(5)(G) The furniture and the equipment shall be safe.
- (a)(6) Ensuring that the documents and information in Sections 87569 through 87570 and 87583 through 87588 are on file at the facility.
- (b) Without the prior approval of the Department, the licensee may accept and retain residents with dementia who meet the definition in Section 87101(a)(4) of an ambulatory person as determined by a physician pursuant to Section 87569(b)(5).

(a)(3)

(b) Ensuring that the facility has a written plan of operation which iIn addition to the requirements as specified in Section 87222, the plan of operation shall addresses the needs of residents with dementia- including:

$\frac{(c)(1)(F)}{(c)(c)(c)}$

- (1) Procedures to <u>for</u> notify<u>ing</u> the resident's physician, family members <u>and responsible</u> <u>persons</u> who have requested notification, and conservator, if any, when a resident's behavior or condition changes;
- (2) Safety measures to address behaviors such as wandering, aggressive behavior and ingestion of toxic materials.
- (c) With the prior approval of the Department pursuant to Section 87116, the licensee may accept and retain residents with dementia who do not meet the definition in Section 87101(a)(4) of an ambulatory person as determined by a physician pursuant to Section 87569(b)(5).
 - (1) With each exception or waiver request the licensee shall submit all of the following:
 - (A) The completed documents and information in Section 87724(a)(6);
 - (B) A plan of operation as specified in Section 87724(a)(3);
 - (C) A training plan as specified in Section 87724(a)(4);
 - (E) Resident assessment and reassessment procedures which conform to Sections 87724(a)(6)(A) and (B):

- (H) A disaster and mass casualty plan as specified in Section 87724(a)(7).
- (ac) Licensees who accept and retain residents with dementia shall be responsible for ensuring the following:

(a)(2)

(1) Ensuring that tThe facility has a nonambulatory fire clearance pursuant to Section 87220 for each room which that will be used to accommodate a resident with dementia who meets the definition of a nonambulatory person as specified in Section 87101n.(2) and Health and Safety Code Section 13131 is unable or unlikely to respond either physically or cognitively to oral instructions relating to fire or other dangers and to independently take appropriate actions during emergencies or drills.

(a)(7)

(2) Ensuring the development of a The disaster and mass casualty plan which meets the as requirementsd in Section 87223 and addresses the safety of residents with dementia.

(a)(4)

- (3) Ensuring that facility In accordance with Section 87565(d), direct care staff are shall be trained in: the areas specified in Section 87565(c), and in
 - (A) dDementia care, identifying and reporting resident abuse and neglect, including hydration and skin care;
 - (B) Recognizing signs and symptoms related to dementia; and
 - (C) and the behavioral eEffects of medications on residents with commonly used for dementia.

(a)(1)

(4) Ensuring that, in addition to Section 87565, staffing There is an adequate number of direct care staff to provide supervision for support each resident's physical, social, emotional, safety and health care needs as identified in the current appraisal with dementia while meeting the needs of all facility residents.

(a)(1)(A)

(A) In addition to requirements specified in Section 87581, Night Supervision, a facility with fewer than 16 residents shall have at least one night staff person awake and on duty if any resident with dementia is determined through a preadmission appraisal, reappraisal or observation to require awake night supervision.

(5) Each resident with dementia shall have <u>has</u> an annual medical assessment <u>as</u> specified in Section 87569, Medical Assessment, and an annual reappraisal <u>done at least annually</u>, both of which shall include a reassessment of the resident's dementia care needs.

$\frac{(a)(6)(B)}{(a)(a)(a)(a)(a)(b)(b)}$

- (A) When any medical assessment, appraisal, or observation indicates that the resident's dementia care needs have changed, corresponding changes shall be made in the care and supervision provided to that resident, or the resident shall be relocated to another facility or to another residence appropriate for that resident's current needs.
- (6) Appraisals are conducted on an ongoing basis pursuant to Section 87587, Reappraisals.

(c)(1)(G)

(7) A written plan developed with the concurrence of each resident's physician, which that includes facility-wide practices and resident-specific procedures and may include facility-wide practices to minimize the need for psychoactive medications.

(c)(1)(D)

(8) An activity program which that addresses the needs and limitations of residents with dementia, and includes large motor activities, and includes perceptual and sensory stimulation.

$\frac{(a)(5)}{(a)(5)A}$ and $\frac{(a)(5)A)}{(a)(5)A}$

(d) Ensuring that iIn addition to requirements as specified in Section 87691, Maintenance and Operation, safety of the physical plant modifications shall include, but not be limited to, the following: inaccessibility to residents of rRanges, heaters, wood stoves, inserts, and other heating devices are made inaccessible.

$\frac{(a)(5)(B)}{(a)(a)(a)(a)(a)(b)}$

- (e) Swimming pools and other bodies of water are shall be fenced and in compliance with state and local building codes.
- (f) The following shall be stored inaccessible to residents with dementia:

(a)(5)(C)

(1) Knives, matches, firearms, tools and other items that could constitute a danger to the resident(s) are stored where they are inaccessible to the residents.

(a)(5)(D)

- (2) Over-the-counter medication, in addition to the medications specified in Section 87575 nutritional supplements or vitamins, and all toxic substances such as certain plants, gardening supplies, alcohol and cigarettes are made inaccessible.
- (g) Residents should be allowed to keep personal grooming and hygiene items in their own possession, unless there is evidence to substantiate that the resident cannot safely manage the items.
 - (1) Evidence may include documentation from the resident's physician that the resident is at risk if allowed direct access to personal grooming and hygiene items.
 - (2) The licensee shall ensure ongoing assessment of all residents' supervision requirements.
 - (3) The licensee shall develop and maintain a current written plan to ensure that a resident's access to grooming and hygiene items does not pose a hazard to other residents.

$\frac{(a)(5)(E)}{(a)(5)(E)}$

- (h) Yards Outdoor facility space used for resident recreation and leisure shall be completely enclosed by a fenced, with self-closing latches and gates, or walls, to protect the safety of residents.
- (di) The licensee may use wrist bands and other resident egress alert devices with the prior written approval of the resident or authorized representative conservator, provided that such devices do not violate the resident's rights as specified in Section 87572, Personal Rights.

$\frac{(a)(5)(F)}{(a)(5)(F)}$

- (j) Exterior doors The licensee shall include an operational bell/buzzer or other have an auditory devices to alert or other staff when the door is opened alert feature to monitor exits, if exiting presents a hazard to any resident.
- (ek) The following initial and continuing requirements must be met for the licensee to utilize delayed egress devices on exterior doors or perimeter fence gates:
 - (1) The licensee shall notify the Department <u>licensing agency</u> immediately after determining the date that the device will be installed.
 - (2) The licensee shall ensure that the fire clearance includes approval of delayed egress devices.

- (3) Following the disaster and mass casualty plan specified in Section 87724(a)(7), f<u>F</u>ire and earthquake drills shall be conducted at least once every three months on each shift and shall include, at a minimum, all facility <u>direct care</u> staff who provide or supervise resident care and supervision.
- (4) Without violating Section 87572, <u>Personal Rights</u>, facility staff shall attempt to redirect a resident with dementia who attempts to leave the facility.
- (5) Residents who continue to indicate a desire to leave the facility following an egress delay redirection shall be permitted to do so with staff supervision.
- (6) Without violating Section 87572, <u>Personal Rights</u>, facility staff shall ensure the continued safety of residents with dementia when <u>if</u> they wander away from the facility.
- (7) For each incident in which a resident wanders away from the facility unsupervised, Tthe licensee shall report the incident to the Department licensing agency, to the resident's conservator and/or other responsible representative person, if any, and to any family member who has requested notification each incident in which a resident with dementia wanders away from the facility. The report shall be made by telephone no later than the next working day and in writing within seven calendar days.
- (8) Delayed egress devices shall not substitute for trained staff in sufficient numbers to meet the care and supervision needs of all residents and to escort residents with dementia who leave the facility.
- (9) The licensee shall not accept or retain residents determined by a physician to have a primary diagnosis of a mental disorder unrelated to dementia.
- (fl) The following initial and continuing requirements must shall be met for the licensee to lock exterior doors or perimeter fence gates:
 - (1) The <u>IL</u>icensees shall notify the <u>Department licensing agency</u> of <u>his/her their</u> intention to lock exterior doors and/or perimeter fence gates.
 - (2) The licensee shall ensure that the fire clearance includes approval of locked exterior doors or locked perimeter fence gates.
 - (3) Pursuant to Sections 87116 and 87724(c), the licensee shall obtain a waiver from Section 87582(c)(4), to permit the acceptance of residents with dementia.

- (4<u>3</u>) Pursuant to Section 87116, tThe licensee shall obtain a waiver from Section 87572(a)(6), to prevent residents from leaving the facility.
 - (A) Facility staff shall attempt to redirect any unaccompanied resident(s) leaving the facility.
- (54) The licensee shall maintain either of the following documents in the resident's record at the facility and send a copy of the document to the Department within five working days of each resident's admission:
 - (A) The conservator's written consent for admission for each resident who has been conserved under the Probate Code or the Lanterman-Petris-Short Act; or
 - (B) A written statement signed by each <u>non-conserved</u> resident who has not been <u>conserved</u> that <u>states</u> the resident understands that the facility has exterior door locks or perimeter fence gate locks and that the resident voluntarily consents to admission.
- (65) Interior and exterior space shall be available on the facility premises to permit residents with dementia to wander freely and safely.
- (76) Locked exterior doors or perimeter fences with locked gates shall not substitute for trained staff in sufficient numbers to meet the care and supervision needs of all residents.
- (<u>87</u>) The licensee shall not accept or retain residents determined by a physician to have a primary diagnosis of a mental disorder unrelated to dementia.
- (98) Following the disaster and mass casualty plan specified in Section 87724(a)(7), fFire and earthquake drills shall be conducted at least once every three months on each shift and shall include, at a minimum, all facility direct care staff who provide or supervise resident care and supervision.

Authority cited: Sections 1569.30(a) and 1569.698(c), Health and Safety Code.

Reference: Sections 1569.2(a), (e), and (j), 1569.30(b), 1569.312, 1569.698, and 1569.699, Health and Safety Code.

87725 ADVERTISING DEMENTIA SPECIAL CARE, PROGRAMMING, AND/OR ENVIRONMENTS 87725

- (a) Licensees who meet the requirements in Section 87724, Care of Persons with Dementia, may provide dementia care. Licensees who advertise, promote, or otherwise hold themselves out as providing special care, programming, and/or environments for residents with dementia or related disorders shall also meet the following requirements:
 - (1) The licensee shall comply with the requirements of Title 22, Division 6, Chapter 8 of the California Code of Regulations governing residential care facilities for the elderly.
 - (2) The licensee shall ensure that direct care staff who provide care to any resident(s) with dementia meet the training requirements in Section 87725.1, including six hours of resident care orientation within the first four weeks of employment and eight hours of in-service training per year on the subject of serving residents with dementia.
 - (A) Direct care staff excludes staff used only for staff mealtime and break relief.
 - (B) Direct care staff may provide dementia special care to residents in the facility (itself) or in designated areas of the facility.
 - (3) In addition to the requirements for the plan of operation specified in Sections 87222 and 87724(b), the licensee shall submit a description of the following facility features:
 - (A) Philosophy, including, but not limited to, program goals/objectives in relation to meeting the needs of residents with dementia.
 - (B) Pre-admission assessment, including the types of assessment tools used to determine residents' dementia care needs and who will participate in the assessment.
 - (C) Admission, including the following items that must be addressed when admitting a resident who requires dementia special care:
 - Specification of the designated areas in the facility where dementia special care is provided, which may be the entire facility or only parts of it.
 - 2. Services provided specific to residents with dementia, including hospice care (if allowable), and a description of how costs for these services are determined.

- 3. Procedures in place to ensure that the plan of operation will be made available for review upon request, as required by Section 87725(a)(4).
- (D) Assessment(s), including the following as they pertain to residents receiving dementia special care:
 - 1. Types of assessments used;
 - 2. Who will participate in resident assessments and procedures for ensuring the opportunity for resident and family involvement; and
 - 3. Frequency of assessments.
- (E) Activity program for residents with dementia, including, but not limited to:
 - 1. Types of activities;
 - (i) Activities may include cognitive/mental stimulation (e.g., crafts, reading, writing, music, current events, reminiscences, movies); physical activities (e.g., gross and fine motor skills); work activities and life skills; social activities; cultural/religious activities; sensory activities; individual/group activities (e.g., games); pet care; and outdoor activities (e.g., field trips, gardening).
 - 2. Frequency of activities; and
 - 3. The process to determine what types of activities shall be planned to encompass residents' needs.
 - (i) Resident needs are based on personal preferences, age, beliefs, culture, values, attention span, and life experiences (e.g., family and friend involvement, favorite pastimes, occupations, and geographic areas lived in and visited).
- (F) Staff. Describe experience and educational qualifications, if any, for direct care staff who provide dementia special care.

- (G) Staff training. A statement that direct care staff who provide dementia special care shall meet the training requirements under Section 87725.1, Training Requirements If Advertising Dementia Special Care, Programming, and/or Environments.
 - 1. <u>In addition, the licensee shall describe any other training requirements</u> for direct care staff.
- (H) Physical environment, including environmental factors that ensure a safe, secure, familiar and consistent environment for residents with dementia.
 - 1. Environmental factors that may be considered include: bedroom decor; architectural and safety features (e.g., wide hallways, handrails, delayed egress, secured perimeters); lighting; colors and visual contrasts; types of furniture; signs; noise factors; memory boxes; nourishment and hydration stations; and functional outdoor space and exercise pathways.
- (I) Changes in condition. Procedures to be followed when a resident's condition changes, including, but not limited to, an explanation of:
 - 1. When a new care plan is required;
 - 2. At what point a physician (if any) is involved in developing a care plan;
 - 3. Special techniques/programs (if any) used for managing specific types of behavior; and
 - 4. The conditions that would require a resident to be relocated to a more secure environment (e.g. delayed egress, secured perimeters).
- (J) Success indicators, including procedures to:
 - 1. Ensure an ongoing review of facility programs pertaining to care of residents with dementia;
 - 2. Make necessary adjustments to better meet residents' needs; and
 - <u>3.</u> Assess the program's overall effectiveness/success.
 - (i) Examples of areas that may be reviewed include incident reports, staffing levels, input from others, and resident participation in program activities.

- (4) The admission agreement, as specified in Section 87568(e), shall inform the resident and the responsible person, if any, or the conservator, that the facility features, as specified in Section 87725(a)(3), are described in the plan of operation and are available for review upon request.
- (5) The licensee shall maintain copies of all facility advertisements and marketing/promotional material that indicate the licensee provides special care, programming, and/or environments for residents with dementia or related disorders, and shall maintain the information for a minimum of three years following discontinuance.
 - (A) This material shall be available to the public upon request.
 - (B) The licensing agency shall be entitled to inspect, audit, remove if necessary, and copy this material upon demand during normal business hours.
- (b) <u>Licensees who will discontinue advertising, promoting, or otherwise holding themselves</u> out as providing special care, programming, and/or environments for residents with dementia or related disorders shall:
 - (1) Provide written notification to the licensing agency and to the resident and the responsible person, if any, or the conservator, at least 30 calendar days prior to discontinuing advertising or promoting dementia special care, programming, and/or environments.
 - (A) The notification shall state that the licensee will no longer be advertising or promoting dementia special care, programming, and/or environments; and, therefore, shall no longer be required to meet the requirements specified in Section 87725 and the training requirements in Section 87725.1.
 - (B) The licensee shall maintain a copy of the written notification in each resident's records.
 - Within 30 calendar days from notifying the licensing agency, the resident and the responsible person, if any, or the conservator, the licensee shall cease all advertisements pertaining to dementia special care and remove all written references that indicate that the licensee provides dementia special care, programming, and/or environments.
 - (A) These references shall be removed from all promotional material, advertisements, and/or printed material, including admission agreements and the plan of operation.

Authority Cited: Sections 1569.30 and 1569.31, Health and Safety Code.

Reference: Sections 1569.15(m), 1569.22, 1569.312, 1569.33(d), 1569.355, 1569.62,

1569.625, 1569.626, and 1569.627, Health and Safety Code.

87725.1 TRAINING REQUIREMENTS IF ADVERTISING DEMENTIA SPECIAL CARE, PROGRAMMING, AND/OR ENVIRONMENTS

<u>87725.1</u>

- (a) Licensees who advertise, promote, or otherwise hold themselves out as providing special care, programming, and/or environments for residents with dementia or related disorders shall ensure that all direct care staff, described in Section 87725(a)(2), who provide care to residents with dementia, meet the following training requirements:
 - (1) <u>Direct care staff shall complete six hours of orientation specific to the care of residents with dementia within the first four weeks of working in the facility, or in designated areas of the facility where dementia special care is provided.</u>
 - (A) This orientation shall be repeated if either of the following occur:
 - 1. An employee returns to work for the same licensee after a break in service of more than sixty consecutive calendar days; or
 - 2. An employee goes to work for another licensee to provide dementia special care.
 - (B) This orientation shall be separate from other training and be exclusively on the care of residents with dementia.
 - (C) Various methods of instruction may be used, including but not limited to, presenters knowledgeable about dementia, video instruction tapes, interactive material, books, and/or other materials approved by organizations or individuals specializing in dementia.
 - 1. Instruction may include up to two hours of mentoring and hands-on training from direct care staff who have met the training requirements specified in Section 87725.1.
 - Direct care staff shall complete at least eight hours of in-service training on the subject of serving residents with dementia, within twelve months of working in the facility, or in designated areas of the facility where dementia special care is provided, and in each succeeding twelve-month period. Direct care staff hired prior to the effective date of Section 87725.1, shall complete the eight hours of in-service training within twelve months of this date and in each succeeding twelve-month period.
 - (A) A minimum of two of the following training topics shall be covered annually, and all topics shall be covered within a three-year period:

- 1. Effects of medications on the behavior of residents with dementia;
- 2. Common problems, such as wandering, aggression, and inappropriate sexual behavior;
- 3. <u>Positive therapeutic interventions and activities such as exercise, sensory stimulation, activities of daily living, and social, recreational and rehabilitative activities;</u>
- <u>4.</u> <u>Communication skills (resident/staff relations);</u>
- 5. Promoting resident dignity, independence, individuality, privacy and choice; and
- <u>6.</u> End of life issues, including hospice.
- (B) Training may be provided at the facility or offsite and may include a combination of observation and practical application.
- (C) The training shall be developed by, or in consultation with, individuals or organizations with expertise in dementia care and with knowledge on the training topic areas specified in Section 87725.1(a)(2)(A).
 - 1. Examples of organizations that specialize in dementia care include, but are not limited to: the Alzheimer's Association, Alzheimer's Disease Diagnostic and Treatment Centers affiliated with the University of California, Family Caregiver Alliance and Caregiver Resource Centers, American Society on Aging, colleges and universities, and individuals with educational and professional qualifications specific to dementia.
- (D) Maintain the following documentation for the consultant(s) described in Section 87725.1(a)(2)(C):
 - 1. Name, address, and telephone number of consultant(s);
 - 2. Date(s) when consultation was provided; and
 - 3. Organization affiliation (if any) as specified in Section 87725.1(a)(2)(C)1., and/or educational and professional qualifications specific to dementia.
- (E) The trainer(s) shall have completed a minimum of three (3) units on psychology of aging.

- 1. A licensee and/or employee(s) of the facility, who has/have a minimum of three (3) units on psychology of aging, may provide the training.
- (F) Maintain the following documentation for the trainer(s) described in Section 87725.1(a)(2)(E):
 - 1. Name, address, and telephone number of trainer(s);
 - 2. Topics/subject matter taught;
 - 3. Dates/hours of training provided; and
 - 4. An official transcript from an accredited educational facility showing three (3) completed units on psychology of aging.
- (G) The documentation specified in Sections 87725.1(a)(2)(D) and (a)(2)(F) shall be retained for a minimum of three years after the date consultation services/training are provided.
 - 1. The licensing agency shall be entitled to inspect, audit, remove if necessary, and copy this documentation upon demand during normal business hours.
- (H) Maintain the documentation verifying completion of the training required by Section 87725.1 in the personnel records for direct care staff, as required by Section 87566(b).

Authority Cited: Sections 1569.30 and 1569.31, Health and Safety Code.

<u>Reference:</u> Sections 1569.33(d), 1569.62(a), 1569.625, and 1569.626, Health and Safety Code.

87725.2 ADVERTISING DEMENTIA SPECIAL CARE, PROGRAMMING AND/OR ENVIRONMENTS UPON EFFECTIVE DATE OF REGULATIONS 87725.2

- (a) Licensees who will no longer advertise, promote, or otherwise hold themselves out as providing dementia special care, programming, and/or environments shall meet all of the requirements of Section 87725(b) within 120 calendar days from the effective date of Sections 87725 and 87725.1.
- (b) Licensees who continue to advertise, promote, or otherwise hold themselves out as providing dementia special care, programming, and/or environments shall meet the requirements in Sections 87725(a) and 87725.1 upon their effective date, with the following exceptions:
 - (1) Within 120 calendar days from the effective date of these sections, the licensee shall:
 - (A) Submit to the licensing agency the additional requirements for the plan of operation that have not been submitted previously, as described in Section 87725(a)(3).
 - (B) Amend the admission agreement to inform the resident and the responsible person, if any, or the conservator, that the facility features, as specified in Section 87725(a)(3), are described in the plan of operation and are available for review upon request. Requirements in Sections 87568(e) and (f) shall also be met.

Authority Cited: Sections 1569.30 and 1569.31, Health and Safety Code.

Reference: Sections 1569.33(d), 1569.62(a), 1569.625, 1569.626, and 1569.627, Health and Safety Code.